

20879924

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Sentry Realty Corporation 3855 Lakewood Blvd. (N/5) 0850-0009, Long Beach, CA 90806		CAL0000255086579924		A. State Manifest Document Number 20879924	
4. Generator's Phone (562) 498-6524				B. State Generator's ID	
5. Transporter 1 Company Name ONYX Environmental Services LLC.		6. US EPA ID Number NJ0080631369		C. State Transporter's ID [Reserved]	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (973) 347-7111	
9. Designated Facility Name and Site Address ONYX Environmental Services, LLC. (Azusa) 1704 West First Street Azusa, CA 91702		10. US EPA ID Number CAD008302903		E. State Transporter's ID [Reserved] F. Transporter's Phone G. State Facility's ID CAD008302903 H. Facility's Phone (626) 334-5117	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Hazardous waste liquid, n.o.s. (Dichloroethylene, Trichloroethylene), 9, NA3082, PGIII		001	DM000020	G	
b. Hazardous waste liquid, n.o.s. (Trichloroethylene), 9, NA3082, PGIII		006	DM000240	G	
c.					
d.					
J. Additional Descriptions for Materials Listed Above 11a. Profile number 580775 Ground Water Various (Add EPA Code: D040) 11b. Profile number 580775 Ground Water Various		K. Handling Codes for Wastes Listed Above a. 01 b. 01 c. d.			
15. Special Handling Instructions and Additional Information 24 Hour Emergency Telephone Number (800) 424-9300 (Chemtrec). DOT ERG#(11a-b) 171 Site Address: 19400 Harbortown Way, Torrance, CA 90501					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Marcia Taleff		Signature Marcia Taleff		Month Day Year 10/30/02	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name MARK JELIS		Signature Mark Jelis		Month Day Year 10/30/02	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Michael Bailey					
Signature Michael Bailey		Month Day Year 10/30/02			

DO NOT WRITE BELOW THIS LINE.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

208/9924
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UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No.	Manifest Document #	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Boeing Realty Corporation 3855 Lakewood Blvd., (M/S D850-0009), Long Beach, CA 90846		C A L 0 0 0 2 5 5 0 6 5 7 9 9 2 4		A. State Manifest Document Number 20879924	
4. Generator's Phone ((562) 496-6524		6. US EPA ID Number		B. State Generator's ID	
5. Transporter 1 Company Name ONYX Environmental Services L.L.C.		N J D 0 8 0 6 3 1 3 6 9		C. State Transporter's ID [Reserved.]	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (973) 347-7111	
9. Designated Facility Name and Site Address ONYX Environmental Services, L.L.C. (Azusa) 1704 West First Street Azusa, CA 91702		10. US EPA ID Number C A D 0 0 8 3 0 2 9 0 3		E. State Transporter's ID [Reserved.] F. Transporter's Phone G. State Facility's ID H. Facility's Phone (626) 334-5117	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
a. Hazardous waste liquid, n.o.s. (Dichloroethylene, Trichloroethene), 9, NA3082, PGIII		001 DM00020		G	1. Waste Number State 134 EPA/Other D029
b. Hazardous waste liquid, n.o.s. (Trichloroethylene), 9, NA3082, PGIII		006 DM00240		G	State 134 EPA/Other D040
c.					State EPA/Other
d.					State EPA/Other
J. Additional Descriptions for Materials Listed Above 11a. Profile number: 580775. Ground Water - Various (Add EPA Code: D040) 11b. Profile number: 580775. Ground Water - Various		K. Handling Codes for Wastes Listed Above a. b. c. d.			
15. Special Handling Instructions and Additional Information 24 Hour Emergency Telephone Number (800) 424- 9300 (Chemtrec). DOT ERG#11a-b) 171 Site Address: 19400 Harbortgate Way, Torrance, CA 90501					
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Printed/Typed Name Marcia Taleff		Signature <i>Marcia Taleff</i>		Month Day Year 1 0 3 0 0 2	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name MARK JELLS		Signature <i>Mark Jells</i>		Month Day Year 1 0 3 0 0 2	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name		Signature		Month Day Year	

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Boring Realty Corporation 3955 Lakewood Blvd., (N/5) DB50-0009, Long Beach, CA 90846		CAL00025506579924		A. State Manifest Document Number 20879924	
4. Generator's Phone (907) 406-6524		6. US EPA ID Number		B. State Generator's ID	
5. Transporter 1 Company Name ONYX Environmental Services L.L.C.		NJ0080631369		C. State Transporter's ID [Reserved]	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (973) 347-7111	
9. Designated Facility Name and Site Address ONYX Environmental Services, L.L.C. (Azusa) 1704 West First Street Azusa, CA 91702		10. US EPA ID Number CAD008302903		E. State Transporter's ID [Reserved] F. Transporter's Phone G. State Facility's ID H. Facility's Phone (626) 334-5117	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
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b. Hazardous waste liquid, n.o.s. (Trichloroethylene), 9, NA3082, PGIII		006	DM00240	G	State 134 EPA/Other D040
c.					State EPA/Other
d.					State EPA/Other
J. Additional Descriptions for Materials Listed Above 11a. Profile number: 580775, Ground Water, Various (Add EPA Code: D040) 11b. Profile number: 580775, Ground Water, Various		K. Handling Codes for Wastes Listed Above a. b. c. d.			
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Printed/Typed Name Marica Taleff		Signature Marica Taleff		Month Day Year 1 0 3 0 02	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name MARK JELIS		Signature Mark Jelis		Month Day Year 1 0 3 0 02	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name		Signature		Month Day Year	

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LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM PHASE IV

Page 1 of 1

Generator Name: Boeing Realty Corp. EPA ID # CAL000255065 State Manifest No. 20879924

1. If waste is a wastewater (see 40 CFR 268.2) place "w" next to the applicable code(s)

Profile # 580775

2. CODES WITH SUBCATEGORIES (place appropriate letter from section 8 before each code that applies) (See 40 CFR 268 for details)

- | | | | | |
|--|---|---|---|---|
| <input type="checkbox"/> D001 HI-TOC | <input type="checkbox"/> D008 Lead acid batteries | <input type="checkbox"/> K069 Not Calcium Sulfate | <input type="checkbox"/> P065 Lo RMERC Res. | <input type="checkbox"/> U151 Hi Hg |
| <input type="checkbox"/> D001 Except HI-TOC | <input type="checkbox"/> D009 Organic Hg > 260ppm | <input type="checkbox"/> K071 Rmerc Res. | <input type="checkbox"/> P065 Not Inc./RMERC Res. | <input type="checkbox"/> U240 2, 4 D |
| <input type="checkbox"/> D003 Reactive Cyanide | <input type="checkbox"/> D009 Inorg. Hg > 260 | <input type="checkbox"/> K071 Not Rmerc Res. | <input type="checkbox"/> P065 Hi Inc./RMERC Res. | <input type="checkbox"/> U240 2, 4 esters & Salts |
| <input type="checkbox"/> D003 Reactive Sulfide | <input type="checkbox"/> D009 Hg < 260 | <input type="checkbox"/> K106 Lo Rmerc Res. | <input type="checkbox"/> P092 Lo Inc. Res. | |
| <input type="checkbox"/> D003 Explosive | <input type="checkbox"/> F025 Light ends | <input type="checkbox"/> K106 Not Rmerc Res. | <input type="checkbox"/> P092 Lo RMERC Res. | |
| <input type="checkbox"/> D003 Water Reactives | <input type="checkbox"/> F025 Spent filter | <input type="checkbox"/> K106 > 260 ppm Hg | <input type="checkbox"/> P092 Not Inc./RMERC Res. | |
| <input type="checkbox"/> D003 Unexp Ord. Emg | <input type="checkbox"/> K006 Hydrated | <input type="checkbox"/> P047 Salts | <input type="checkbox"/> P092 Hi Inc./RMERC Res. | |
| <input type="checkbox"/> D003 Other Reactives | <input type="checkbox"/> K006 Anhydrous | <input type="checkbox"/> P047 Nonsalts | <input type="checkbox"/> U151 Lo RMERC Res. | |
| <input type="checkbox"/> D006 Batteries | <input type="checkbox"/> K069 Calcium Sulfate | <input type="checkbox"/> P065 Lo Inc. Res. | <input type="checkbox"/> U151 Lo Not RMERC Res. | |

The subcategory for D018-D043 waste is "treated in nonCWA/nonSDWA facility" unless the following box is checked: ☐ "treated in CWA/SDWA facility"

3. COMMON CODES (Place appropriate letter from section 8 before each code that applies)

- | | | | | | | | | | | | | | | | |
|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D002 | <input type="checkbox"/> P012 | <input type="checkbox"/> P030 | <input type="checkbox"/> P051 | <input type="checkbox"/> P098 | <input type="checkbox"/> P105 | <input type="checkbox"/> P205 | <input type="checkbox"/> F006 | <input type="checkbox"/> F007 | <input type="checkbox"/> F008 | <input type="checkbox"/> F009 | <input type="checkbox"/> F010 | <input type="checkbox"/> F011 | <input type="checkbox"/> F012 | <input type="checkbox"/> F019 | <input type="checkbox"/> F039 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D005 | <input type="checkbox"/> D006 | <input type="checkbox"/> D007 | <input type="checkbox"/> D008 | <input type="checkbox"/> D009 | <input type="checkbox"/> D010 | <input type="checkbox"/> D011 | <input type="checkbox"/> D012 | <input type="checkbox"/> D013 | <input type="checkbox"/> D014 | <input type="checkbox"/> D015 | <input type="checkbox"/> D016 | <input type="checkbox"/> D017 | <input type="checkbox"/> D018 | <input type="checkbox"/> D019 |
| <input type="checkbox"/> D020 | <input type="checkbox"/> D021 | <input type="checkbox"/> D022 | <input type="checkbox"/> D023 | <input type="checkbox"/> D024 | <input type="checkbox"/> D025 | <input type="checkbox"/> D026 | <input type="checkbox"/> D027 | <input type="checkbox"/> D028 | <input checked="" type="checkbox"/> D029 | <input type="checkbox"/> D030 | <input type="checkbox"/> D031 | <input type="checkbox"/> D032 | <input type="checkbox"/> D033 | <input type="checkbox"/> D034 | <input type="checkbox"/> D035 |
| <input type="checkbox"/> D036 | <input type="checkbox"/> D037 | <input type="checkbox"/> D038 | <input checked="" type="checkbox"/> D039 | <input type="checkbox"/> D040 | <input type="checkbox"/> D041 | <input type="checkbox"/> D042 | <input type="checkbox"/> D043 | <input type="checkbox"/> F001 | <input type="checkbox"/> F002 | <input type="checkbox"/> F003 | <input type="checkbox"/> F004 | <input type="checkbox"/> F005 | <input type="checkbox"/> U002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U006 |
| <input type="checkbox"/> U007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U061 | <input type="checkbox"/> U072 | <input type="checkbox"/> U080 | <input type="checkbox"/> U108 | <input type="checkbox"/> U117 | <input type="checkbox"/> U122 | <input type="checkbox"/> U123 | <input type="checkbox"/> U136 | <input type="checkbox"/> U154 | <input type="checkbox"/> U188 | <input type="checkbox"/> U213 | <input type="checkbox"/> U220 | <input type="checkbox"/> U226 | <input type="checkbox"/> U279 |

ADDITIONAL CODES (Enter all codes not identified above which are associated with waste)

4. USEPA HAZARDOUS WASTE CODE(S)	5. TREATMENT STANDARDS FOR NON-PHASE II STATES (INDICATE THE APPLICABLE TREATMENT STANDARD 268.41, 268.43 OR SPECIFIED TECHNOLOGY BELOW)	6. HOW MUST THE WASTE BE MANAGED? ENTER THE LETTER FROM BELOW

To identify F039, or UHCs managed in non-CWA, use the "F039/Underlying Hazardous Constituents Form" provided and check here: ☐

If no UHCs are present upon generation check here: ☐ Check here if disposal facility will check for all UHCs ☐ (i.e. no UHC form required)

To list additional EPA waste code(s), use the supplemental sheet and check here: ☐ In lieu of supplemental sheet you may use multiple copies of this form.

7. SOLVENT CONSTITUENTS (F001 - F005) Check here if disposal facility will check for all spent solvents

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Acetone | <input type="checkbox"/> Benzene | <input type="checkbox"/> n-Butyl alcohol | <input type="checkbox"/> Carbon disulfide |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Chlorobenzene | <input type="checkbox"/> O-Cresol | <input type="checkbox"/> Cresols (m&p) |
| <input type="checkbox"/> Cyclohexanone | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> 2-Ethoxyethanol | <input type="checkbox"/> Ethyl acetate |
| <input type="checkbox"/> Ethyl benzene | <input type="checkbox"/> Ethyl ether | <input type="checkbox"/> Isobutanol | <input type="checkbox"/> Methanol |
| <input type="checkbox"/> Methylene chloride | <input type="checkbox"/> Methyl ethyl ketone | <input type="checkbox"/> Methyl isobutyl ketone | <input type="checkbox"/> Nitrobenzene |
| <input type="checkbox"/> 2-Nitropropane | <input type="checkbox"/> Pyridine | <input type="checkbox"/> Tetrachloroethylene | <input type="checkbox"/> Toluene |
| <input type="checkbox"/> 1,1,1 Trichloroethane | <input type="checkbox"/> 1, 1, 2-Trichloroethane | <input type="checkbox"/> 1, 1, 2-Trichloro, 1, 2, 2-trifluoroethane | <input type="checkbox"/> Trichloroethylene |
| <input type="checkbox"/> Trichloromonofluoromethane | <input type="checkbox"/> Xylenes | | |

8. (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

A. or ☒ RESTRICTED WASTE REQUIRES TREATMENT

This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.

☐ For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

B.1 RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

B.2 (CERTIFICATION REMOVED BY PHASE IV)

B.3 GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by combustion units as specified in 268.42, Table 1. I have been unable to detect the nonwastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

B.4 DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS

"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

C. RESTRICTED WASTE SUBJECT TO A VARIANCE

This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.

☐ For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

D. RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT

"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

E. WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS

This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Signature

Title

Date

GENERATOR COPY

FORM # OES-78B

BOE-C6-0062580